

# Maine Child Health Survey— Statewide Report—2002

Bureau of Health, Maine Department of Health and Human Services

The Maine Child Health Survey (MCHS) provides an opportunity to gain critical information about the health and well-being of Maine's children.

The MCHS will be used as a basis for child health surveillance in Maine.

The MCHS is designed to answer three main questions.

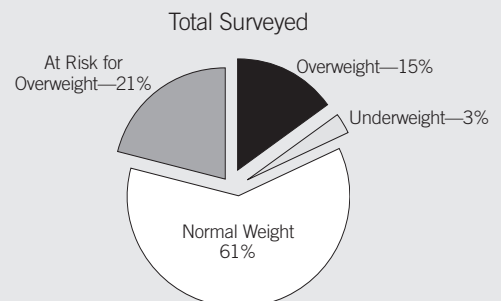
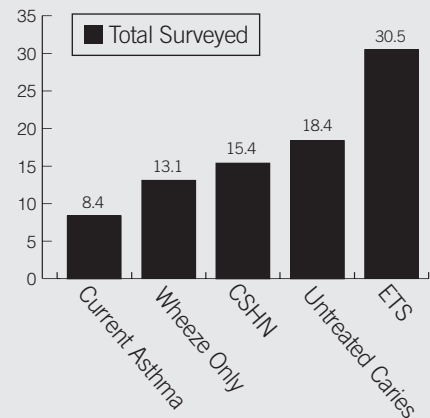
1. What is the prevalence of the differing health conditions?
2. How are the differing health conditions distributed throughout the State?
3. What risk factors are associated with the differing health conditions measured?

Results or Findings:

- The estimated rate of current asthma for kindergartners is 8.4% Statewide.
  - 13.1% of kindergartners in Maine report wheezing/respiratory symptoms with no diagnosed asthma.
  - 15.4% of kindergartners in Maine are considered to have a special health need (CSHN).
  - 18.4% of kindergartners were found to have untreated caries.
  - About 31% of kindergartners are exposed to environmental tobacco smoke (ETS) Statewide.
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- 61% of kindergartners in Maine are considered within the expected, or normal, weight for their age and gender.
  - 3% of kindergartners in Maine are underweight.
  - 21% of kindergartners in Maine are at risk for overweight.
  - 15% of kindergartners in Maine are overweight.



Prevalence of Health Outcomes and Risk Factors Statewide



**Table 1. Statewide prevalence (95% Confidence Intervals) of health outcomes and risk factors among Maine kindergartners, 2002.**

Health outcome or risk factor	Total Surveyed N = 913	
	% (#)	95% CI
Current Asthma	8.4 (73)	4.8 – 12.0
Lifetime Asthma	10.0 (96)	6.4 – 13.6
Wheeze Only	13.1 (89)	6.0 – 20.2
Children w/Special Health Needs	15.4 (140)	11.6 – 19.2
Untreated Caries	18.4 (176)	14.4 – 22.4
Environmental Tobacco Smoke Exposure	30.5 (309)	25.1 – 35.9

**Note:** The percent reported in Table 1 is the best estimate of the prevalence of each health condition among the kindergartners surveyed in Maine public schools. However, this percent is just an estimate. Confidence intervals are similar to “margins of error” in political polling.

**Methods:**

Maine currently collects data for elementary school children through the Maine Child Health Survey (MCHS). The data reported within this report refers to the first Statewide MCHS conducted with kindergartners in 2002. The MCHS is conducted in public schools at the kindergarten, third, and fifth grade levels every other year. Schools are randomly sampled within six geographic regions in Maine on a probability proportional to the enrollment in the school. All children in appropriate grades at the selected schools are invited to participate. The MCHS provides regional- and State-level estimates of multiple health outcomes through responses on questionnaires and physical measurements including height/weight and a dental screen.

**Limitations:**

A limitation of the first Statewide MCHS is the response rate. An overall response rate of 60 percent is the most widely accepted level for generalizing survey results to a population. Statewide, we had a school participation rate of 61.7 percent and a student participation rate of 64.3 percent for an overall response rate of about 40 percent. This is lower than the generally accepted level of 60 percent. Therefore, the statewide results do not broadly reflect the kindergarten population in Maine.

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For more information on the Maine Child Health Survey or for a copy of the complete report, please contact:

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 For a pdf copy of the full report: [www.mainepublichealth.gov](http://www.mainepublichealth.gov)

